

# Minor Change to a Credential Program

**Program Name:** \_\_\_\_\_

**Brief rationale for change:**

## Required Signatures

**The School of Education has reviewed and approved this program change:**

\_\_\_\_\_  
Chair, School of Education Curriculum Committee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director, School of Education

\_\_\_\_\_  
Date

**AURTEC has reviewed and approved this program change:**

\_\_\_\_\_  
Chair, AURTEC

\_\_\_\_\_  
Date

**The College of Communication and Education has reviewed and approved this program change:**

\_\_\_\_\_  
Chair, College Curriculum Committee

\_\_\_\_\_  
Date

\_\_\_\_\_  
College Dean

\_\_\_\_\_  
Date

**Send signature page with revised catalog copy attached to Curriculum Services at zip 128**

Curriculum Technical Review Completed

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